# NO.: P10314.00

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#### INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

ரு நடி Application of: Vinod Sharma, et al.

For:

Serial No.:

Filed:

Sir:

Implantable Medical Device Having Optical Fiber For Sensing Electrical Activity 10/701,710 November 4, 2003 CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this INFORMATION DISCLOSURE STATEMENT and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first class mail, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this day of 2004. goature Kathleen M. Altman **Printed Name** Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 We are transmitting herewith the attached: Information Disclosure Statement **PTO FORM 1449** Copies of the 1<sup>st</sup> pages of the cited references Return Postcard **FEE CALCULATION** \$ 00.00 Pursuant to 37 CFR §1.97(b) (before mailing of first Office Action) \$ 00.00 Pursuant to 37 CFR §1.97(c) with Certification (cited in foreign application not more than 3 months earlier) \$ 00.00 Pursuant to 37 CFR §1.97(e) with Certification \$180.00 Pursuant to 37 CFR §1.97(c) without Certification \$180.00 Pursuant to 37 CFR \$1.97(d) with Certification Applicant hereby petitions for a months' extension of time. If an additional extension of time is required, please consider this petition therefor. Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time. Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked with regard to this filing. A duplicate of this transmittal is enclosed.

> Michael C. Soldner Reg. No. 41,455

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Unknown



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Vinod Sharma, et al. ) Art Unit:

Serial No.: 10/701,710 ) Examiner: Unknown

Filed: November 4, 2003 ) Docket: P-10314.00

For: IMPLANTABLE MEDICAL DEVICE HAVING OPTICAL FIBER FOR SENSING

**ELECTRICAL ACTIVITY** 

## INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### Dear Sir:

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with C.F.R. §§ 1.97 *et. seq.*, the materials enclosed herewith are brought to the attention of the Examiner as possibly being of interest in connection with the above-identified patent application.

Consideration of each of the documents listed on the attached Form 1449 is respectfully requested. Pursuant to the provisions of M.P.E.P. §609, Applicant further requests that a copy of the Form 1449, marked as being considered and initialed by the Examiner, be returned with the next Official Communication.

Date: Group Le, 2004

Respectfully submitted,

Michael C. Soldner Reg. No. 41,455

Telephone: (763) 514-4842

Customer No. 27581

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Approved for use through 10/31/2002. OMB 0551-0031
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

1 of 1

Complete if Known **Application Number** 10/701,710 **Filing Date** November 4, 2003 First Named Inventor Vinod Sharma, et al. Group Art Unit Unknown **Examiner Name** Unknown P10314.00 Attorney Docket Number

U.S. PATENT DOCUMENTS										
Examiner Initials*	Cite <sup>1</sup> No.	U.S. Patent Document  Kind  Number Code <sup>2</sup> (if known)		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Releva Passages or Relevant Figures Appea				
		2002/0116031	A1	Vonk	08/22/2002					
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Examine r Initials*	Cite <sup>1</sup> No.	Foreign Patent Document			Name of Detector of	Date of	Pages, Columns, Lines,	
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> ( <i>if known</i> )	Name of Patentee of Applicant of Cited Document	Publication of Cited Document MM-DD-YYYY	Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
			OTHER PRIOR	ART NON F	 PATENT LITERATUR	E DOCUMENTS	<u> </u>	<u> </u>
Examine r Initials*	Cite <sup>1</sup> No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.						

Examiner	Date
Signature	Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw Line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Unique citation designation number

See attached Kinds of U.S. Patent Documents.

Enter Office that issued the document, by the two-letter code (WIPO Standard St.3).

For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Kind of document by the appropriate symbol as indicated on the document under WIPO Standard ST. 16 if possible.

Applicant is to place a check mark here if English language Translation is attached. Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language translation is attached.